

HAWAII STATE ETHICS COMMISSION 1001 BISHOP STREET, ASB TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: 587-0460 FAX: 587-0470 email: ethics@hawaiiethics.org

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STATE OF HAWAII LITATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST				
NAME(Last)	(First)	(Middle)	TELEPHONE	
Horiuchi	Anne	т.	547-5600	
MAILING ADDRESS (Street)	FAX			
1099 Alakea Street,	547-5880			
(City)	(State)	(Zip	(Zip Code)	
Honolulu	HI	968	96813	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby) TELEPHONE				
Goodsill Anderson (547-5600			
MAILING ADDRESS (Street)	FAX			
1099 Alakea Street	. 547–5880			
(City)	(State)	(Zip	(Zip Code)	
Honolulu	нт	968	96813	

PART II ORGANIZATION					
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE			
McDonald's Corporation		630-623-3063			
MAILING ADDRESS (Street)	FAX				
One Kroc Drive		630-623-3057			
(City)	(State)	(Zip Code)			
Oak Brook	IL	60525			
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE			
Patrick Theisen		630-623-3063			
MAILING ADDRESS (Street)	FAX				
One Kroc Drive		630-623-3057			
(City)	(State)	(Zip Code)			
Oak Brook	IL	60525			

PARI	III DESCRIPTION OF SU	BJECTS OF ON WHICH	1 TOU EXPECT TO LOBB!			
	Agriculture	Education	Human Services	Science, Technology & Economic Development		
	Communications & Public Utilities	Government Operations & Finance	Intergovernmental Relatio International Affairs	ns, Tourism & Recreation		
х	Consumer Protection & Commerce	Hawaiian Affairs	🐰 Labor & Employment	Transportation		
	Culture, Arts, Historic Preservation	【 Health	Planning, Land & Water Use Management	Other: (indicate below)		
	Ecology, Energy Environmental Protection	Housing	Public Safety & Correction	ns		
						
PART	IV CERTIFICATION OF L	OBBYIST				
			s, to the best of my knowledge	ge, correct and complete.		
I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.						
anne J. Horruchi		1/6/05				
(Signature of Lobbyist)		(Date)				
PART	V AUTHORIZATION TO	IOPRV		100		
NAME	V AUTHORIZATION TO	LUDDI	TITLE OF AUTHORIZING OFFI	CER OR PERSON REPRESENTED		
1	ITILE OF AUTHORIZING OFFICER OR PERSON REPRESENTED					
Patr	Patrick Theisen Director - Government Relations					
NAME OF ORGANIZATION (if applicable)				TELEPHONE		
McDonald's Corporation				630–623–3063		
MAILING ADDRESS (Street)				FAX		
One	Kroc Drive			630-623-3057		
	(City)	(State)	(Zip Code)			
Oak	Brook	${\bf IL}$	605	525		
I bereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned						

(Signature of Authorizing Officer or Person Represented)